2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003598

Address:

City-St-Zip:

4386 ST. ANDREWS WAY

HARRISBURG, PA 17112

Entity Name: NATIONAL RECOVERY AGENCY, INC

FILED Apr 27, 2006 Secretary of State

		ALTECOVERT AGENCY, II				
Current P	rincipal Plac	e of Business:	New Prin	New Principal Place of Business:		
	MS MILL ROA JRG, PA 171					
Current M	lailing Addre	ss:	New Mail	New Mailing Address:		
P.O. BOX HARRISBI	67015 JRG, PA 171	067015				
FEI Number:	: 23-2105272	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of					s of New Registered Agent:	
1012 DRE	VO, JOSEPH W STREET ATER, FL 337					
	named entity of Florida.	submits this statement for th	e purpose of changing	its registe	ered office or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered	Agent		Date	
Election Car	npaign Financii	ng Trust Fund Contribution ().				
OFFICER	S AND DIREC	CTORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CCEO (KUSIC, ARTHI 6800 CORNEI HARRISBURG	L ROAD	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	PVC (KUSIC, STEVI) Delete EN C	Title: Name:	PVC KUSIC, S	(X) Change () Addition STEVEN C	

Address:

City-St-Zip:

2307 ABBEY LANE HARRISBURG, PA 17112

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN C. KUSIC PVC 04/27/2006